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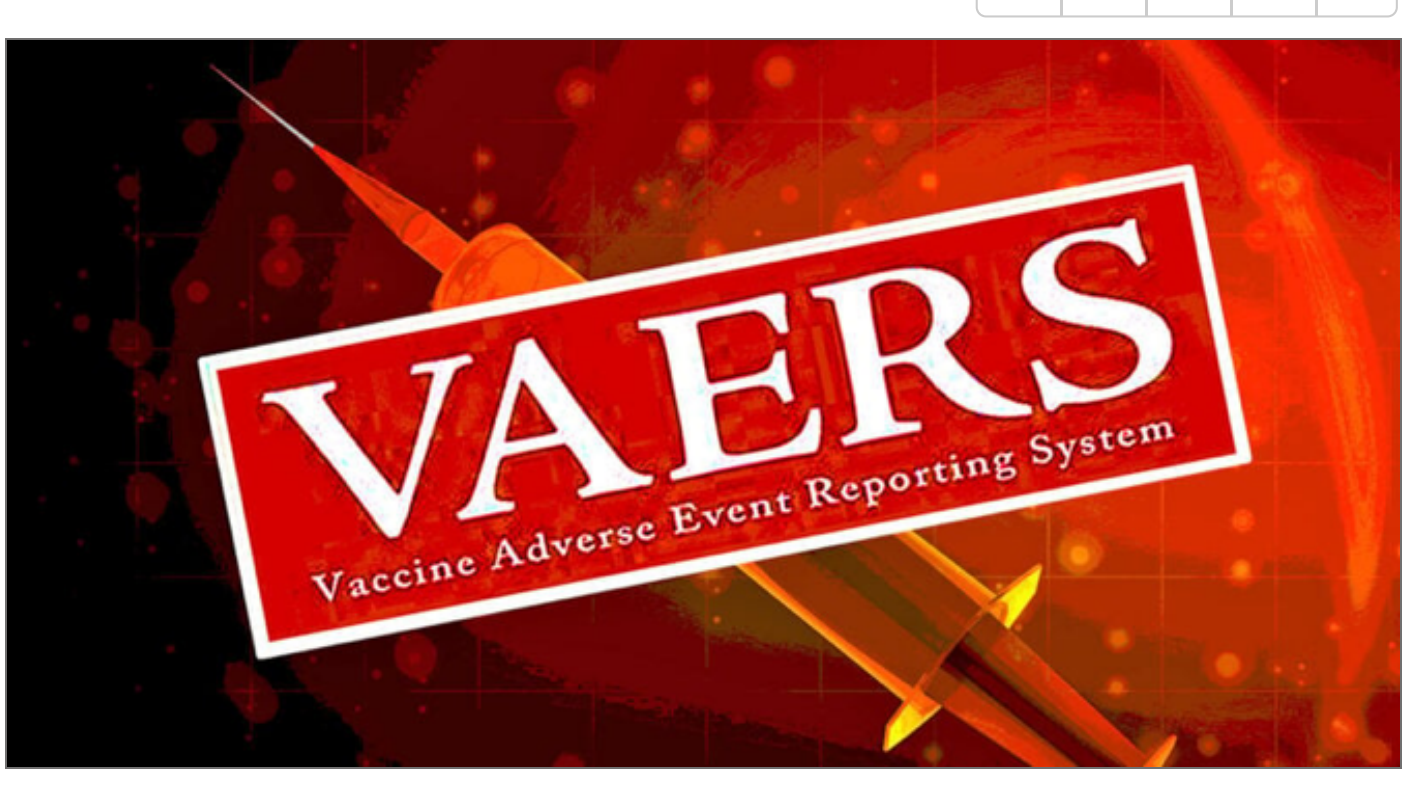
11/14/23 • COVID › NEWS

CDC Runs Two VAERS Systems — The Public Can Access Only One of Them

An investigation by The BMJ into the Vaccine Adverse Event Reporting System, or VAERS, found multiple deficiencies in the system, including the revelation that the government runs two systems — one for the public, and a private back-end system that contains all of the corrections and updates, including deaths that occurred after an initial injury.

By **John-Michael Dumais**

43


VAERS
Vaccine Adverse Event Reporting System

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When Dr. Robert Sullivan collapsed on his treadmill three weeks after his second COVID-19 vaccine in early 2021, he fell into a "nightmare" ordeal that he said exposed glaring deficiencies in the nation's vaccine safety monitoring system.

Diagnosed with sudden onset pulmonary hypertension, the healthy and fit 49-year-old anesthesiologist from Maryland attempted to file a report through the government-run Vaccine Adverse Event Reporting System (VAERS).

But like others interviewed in a recent investigation by The BMJ, Sullivan hit barrier after barrier when trying to submit and update his report.

Almost three years later, still grappling with debilitating symptoms, Sullivan's experience highlights the systemic problems with the U.S. adverse events monitoring system run jointly by the Centers for Disease Control and Prevention (CDC) and the U.S. Food and Drug Administration (FDA).

From doctors unable to file reports to disappearing data, limits on transparency and lack of resources to follow up on concerning vaccine reactions, experts warn VAERS is failing to detect critical safety signals.

According to one of those experts — VAERS researcher Albert Benavides, whose experience includes HMO claims auditing, data analytics and revenue cycle management — VAERS' failure isn't accidental.

"It is not broken," Benavides wrote in his Substack coverage of The BMJ investigation. "VAERS runs cover for the big pharma cabal."

'They even delete legitimate reports'

Like others interviewed by The BMJ, Sullivan experienced limited follow-up after submitting his VAERS report. He received only a temporary report number months after his initial submission.

A physician named "Helen" (pseudonym) told The BMJ that fewer than 20% of concerning reports get follow-up, including many deaths she reported.

In consultation with Benavides, an audit by React19 found that 1 in 3 COVID-19 vaccine adverse events reports in VAERS were either not posted publicly or were deleted. React19 is a nonprofit that collects stories of people injured by the mRNA vaccines.

According to The BMJ, of those queried by React19, "22% had never been given a permanent VAERS ID number and 12% had disappeared from the system entirely."

Benavides, who publishes the VAERSAware dashboards documenting many of the problems with VAERS, said there is even deeper dysfunction in the VAERS system — from inventing symptoms to deleting reports.

"VAERS does not publish all legitimate reports received," Benavides told The Defender. "They throttle publication of reports. They even delete legitimate reports."

For a system dependent on voluntary engagement, these restrictive policies keep critical data hidden, according to Benavides.

In 2007, the U.S. Department of Health and Human Services (HHS) contracted with Harvard Pilgrim Health Care (HPHC) to review the VAERS system. In 2010, HPHC filed its r report, which determined that 1 in 39 people experienced vaccine injuries and that only around 1% of vaccine-related injuries or deaths are ever reported to VAERS.

The CDC, which operates under HHS, scuttled the study, refused to take calls from the researchers and declined to upgrade the VAERS system when a new, much more effective system was developed.

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'Blind spots are self-created'

VAERS "collects reports of symptoms, diagnoses, hospital admissions, and deaths after vaccination for the purpose of capturing post-market safety signals," according to The BMJ.

But the limited transparency of VAERS data presents barriers to proper analysis, according to The BMJ's investigation and researchers like Benavides.

The public — including doctors and other report submitters — can access only incomplete initial reports, not updates with vital details.

This means outcomes like death are often excluded if the initial report was for an injury and a subsequent death report was filed.

"I made the false assumption that my conversation [with VAERS] would result in an adjustment to the publicly reported case," Patrick Whelan, M.D., Ph.D., told The BMJ.

Whelan, a rheumatologist and researcher at the University of California Los Angeles, in 2022 filed a report of a cardiac arrest in a 7-year-old male patient after COVID-19 vaccination.

"I assumed that, since it was a catastrophic event, the safety committee would want to hear about it right away," Whelan said. But nobody called him or requested an update after his submission.

"There was no mechanism for [updating] it," Whelan told The BMJ. "The only option I had was to make a new VAERS report." Without updates, the VAERS data showed that the boy was still hospitalized.

Whelan is one the authors of a recent critique of the Cochrane Review that concluded the COVID-19 mRNA vaccines were not dangerous.

The problem with VAERS is not limited to a lack of adequate follow-up but to the incomplete and often inaccurate information found there.

"VAERS in effect allows typos, truncated lot #'s, UNK [unknown] ages, UNK vax dates, UNK death dates, etc. to pass through into publication," Benavides said.

Benavides said specific data — including ethnicity, hospital names, attending physicians, submitter's relationship to the patient, patient and submitter addresses, telephone numbers and emails — collected by VAERS are not published,

"Any blind spots are self-created, in my opinion," he said.

Agencies maintain two separate VAERS databases — public gets to see only one

"There's two parts to VAERS, the front end and back end," stated Narayan Nair, division director for the FDA's Division of Pharmacovigilance at a December 2022 meeting with advocates, according to The BMJ. "Anything from medical records by law can't be posted on the public-facing system," he said.

The BMJ investigation discovered that the FDA and CDC maintain two separate VAERS databases, one available to the public that contains only initial reports, and a private back-end system containing all of the updates and corrections.

"Anything derived from medical records by law" cannot be posted on the public-facing system, Nair told the advocates, according to The BMJ.

In an apparent contradiction to this claim, The BMJ noted the FDA's Adverse Event Reporting System (FAERS), which collects post-marketing information on drug reactions, posts its updates publicly.

Sullivan, who met Nair years before COVID-19 and considers him a friend, told The Defender that if this "very bright, kind and caring person" could not fix VAERS, "I don't think it's fixable."

"The Wuhan Cover-Up"
by Robert F. Kennedy Jr.
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CDC says it reviewed 20,000 reports of deaths — none were related to COVID shots

Withholding outcome data like deaths obscures critical safety signals, experts contend.

James Gill, a medical examiner, reported the death of a 15-year-old patient after vaccination, but the case was dismissed by the CDC despite autopsy evidence, according to the BMJ investigation.

Physician "Helen" told The BMJ that after filing reports on her medical patients, including six who had died, she received only a single request for medical records on the death and two for hospital-admitted patients.

The standard operating procedure for COVID-19 vaccine reports in VAERS, according to The BMJ, is for reports to be processed quickly and for "serious reports" to receive special review by CDC staff.

However, while some other countries have acknowledged the probable connection between the mRNA vaccines and death, the CDC, while claiming to have reviewed nearly 20,000 death reports, has yet to acknowledge a single death linked to the COVID-19 vaccines, The BMJ said.

Benavides provided The Defender examples of VAERS "deleting legitimate reports," not just duplicates or false claims.

"VAERS even deleted dead Pfizer Trial patients," he said, claiming that this report, for example, was not a "duplicate" and did not appear to be fake.

Benavides said:

> "There are currently about 50 deaths that are not counted as deaths because the correct box is not checked off.
>
> "There are thousands of reports and about 100 deaths in 'UNKNOWN VAX TYPE' in VAERS. Read the narrative to see these are clearly C19 jab-related deaths.
>
> "There are over a thousand cardiac arrests where they are not marked as dead, and I question if they actually survived because there is no mention of ROSC [return of spontaneous circulation]."

"Why couldn't VAERS populate the ages of these dead kids before publication?" Benavides said, pointing to this report on his website.

Physicians report only FDA-recognized adverse events

Ralph Edwards, former director of the Uppsala Monitoring Centre and until recently editor-in-chief of the International Journal of Risk & Safety in Medicine, told The BMJ the regulators may be relying too heavily on past epidemiological data, especially for new types of adverse events. "If something hasn't been heard of before, it tends to be ignored," he said.

Without guidance to report potential risks, doctors also face barriers. "Physicians are only willing to talk about FDA-recognized vaccine adverse events," stated physician "Helen" in a 2021 meeting between the FDA and physicians and advocates, according to The BMJ.

Svetlana Blitshteyn, a neurologist and researcher at the University at Buffalo, New York, told The BMJ if physicians are not educated to look for a specific condition, they're unlikely to test for it or know how to treat it.

Sullivan told The Defender he believes his experience of developing pulmonary hypertension after taking the mRNA vaccine is one such safety signal the CDC and FDA are overlooking — a condition he believes many athletes have unknowingly developed.

Sullivan co-authored a paper of his and one other similar case of post-vaccine pulmonary hypertension. According to the paper:

> "Pulmonary hypertension is a serious disease characterized by damage to lung vasculature and restricted blood flow through narrowed arteries from the right to left heart. The onset of symptoms is typically insidious, progressive and incurable, leading to right heart failure and premature death."

"Athletes are canaries in the coal mine," Sullivan told The Defender, speaking of the unusual numbers of athlete deaths since the rollout of the vaccine. Sullivan thinks that those with superior physical conditioning, like him, stand a better chance of survival with early detection.

However, he said, "Athletes will get echocardiography, and it will be essentially normal. The only way to tell for sure is to do a right-heart catheterization" that can identify the anomaly.

Sullivan believes the lives of many athletes could still be saved if the reporting system recognized and investigated the signal — and said he would be happy to join a project dedicated to this goal.

He also told The Defender he believes many of the sudden deaths reported in the 25- to 44-year-old age group are a result of this hidden condition.

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'The buck stops with the CDC for reforms'

Critics point to choices by the CDC as compounding VAERS' passive design and understaffing issues.

Despite over 1.7 million reports since the COVID-19 vaccine rollout, staffing was not boosted accordingly, according to statements the CDC made to The BMJ.

A Freedom of Information Act request by The BMJ revealed Pfizer has nearly 1,000 more full-time employees working on vaccine surveillance than the CDC. Records showed in 2021, Pfizer on-boarded 600 additional full-time employees to handle the volume of adverse reports and planned to hire 200 more.

Physician "Helen" in The BMJ article called for an end to the "negative feedback loop" whereby the FDA fails to list adverse reactions because passive surveillance systems like the FDA's don't display them, while at the same time, because of that lack of disclosure, "physicians are blinded to the adverse reactions in their patients, and thus aren't reporting them."

"The buck stops with the CDC for reforms needed to open up data," Benavides told The Defender, adding several suggestions that could immediately improve VAERS:

> "Revert back to pre-January 2011 when VAERS did append initial reports with follow-up data, including death. Take off the arbitrary 30-minute time limit to file a report before getting kicked off. Make the process easier to submit follow-up data."

When asked why the incompetence of VAERS had been allowed to continue for so long, Sullivan told The Defender, "Because of the lack of product liability" for the vaccines "and the surge to defend economic interests."

Sullivan said he'd like to see the following changes to the system:

- Pharmaceutical advertising banned.
- Pharmaceutical company revenues devoted to advertising instead be spent on R&D.
- The tax money collected on pharma profits be directly sent to victim injury funds.

Yale cardiologist takes on study of COVID vaccine injuries

Benavides said he spoke with Sen. Ron Johnson (R-Wis.) Monday and is also in discussion with Rep. Marjorie Taylor Greene (R-Ga.) of the House Select Subcommittee on the Coronavirus Pandemic to address the concerns with VAERS, including the under-publishing of reports.

"That's a long overdue prospect and it would be incredible to actually get some analysis by that committee," he said.

Another bright spot comes from news reported in The BMJ's investigation that Dr. Harlan Krumholz, a cardiologist and researcher at Yale University, has been recruiting members of React19 to study their vaccine injuries.

"We are working hard to understand the experience, clinical course, and potential mechanisms of the ailments reported by those who have had severe symptoms arise soon after the vaccination," Krumholz told The BMJ.

Sullivan told The Defender that medical science is "just beginning to catalog the damage to the heart" from the vaccines but that "in order to treat something, you have to diagnose it" — and that, because of the shortcomings with VAERS, "we have yet to scratch the surface of that."

Sullivan, now almost three years into his ordeal, is outliving his initial prognosis.

"I have a grim diagnosis hanging over me, but I'm optimistic because I'm still here," he said. "I had something bad happen to me, but I've met so many amazing, wonderful people along the way who are just interested in truth."

"I'm going to live the best and most productive life I can with the time I have left," Sullivan said, helping others who "have this cloud hanging over their future."

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John-Michael Dumais
John-Michael Dumais is a news editor for The Defender. He has been a writer and community organizer on a variety of issues, including the death penalty, war, health freedom and all things related to the COVID-19 pandemic.

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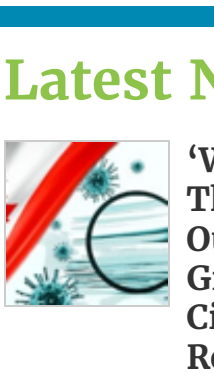

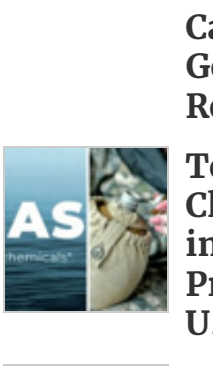

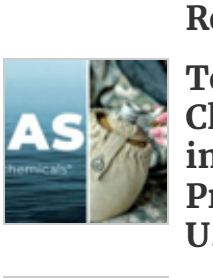

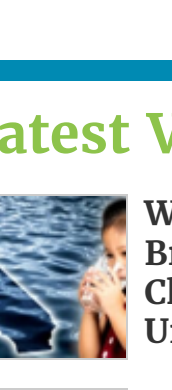

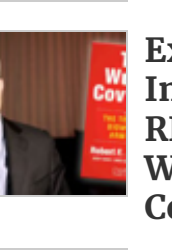

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3 • Share Best Newest Oldest

GarySummers
17 days ago

see more

26 0 Reply • Share ›

Christine Jahnig → GarySummers
17 days ago
Boy, have you got that one right!
5 0 Reply • Share ›

kaoshispano → GarySummers
16 days ago
They are the empowered arms of the elite owner about Industry, Money, Comuncations.... WE work, we PAY and they kill us.
2 0 Reply • Share ›

Allen
17 days ago
VAERS is not a broken system.

The CDC is not "corrupted."

The FDA is not a "captured regulatory agency."

Anyone who holds to the above statements has not studied and does not understand the history of VAERS or these agencies nor understand the purpose of that system and these agencies.

The VAERS system is and always has been designed as a form of damage control that pacifies the public into thinking, "We have put a system in place for you if anything goes wrong. See, we are protecting your interests." In this way the public is duped and the medical industry, which is poisoning people daily with vaccines, can claim they have established an avenue for people to report damages and since the reporting is relatively infrequent these medical products must be safe.

VAERS was always designed to validate the vaccine program.

The CDC and the FDA serve a similar but far more nefarious function in that people believe

see more

24 0 Reply • Share ›

MultiChubby1 → Allen
17 days ago
Freedom of choice is the new "opiate of the people" So what are my choices? Vaccines, remdesivir,, ventilator, intubation...Where's the box for 'do not accept'? Sorry, that's not on the list of choices.
5 0 Reply • Share ›

Bill H RRT → MultiChubby1
16 days ago
Unfortunately, at the start of the pandemic, people were turned away from any medical intervention. "Come back when it gets worse." was the main line of "expert" healthcare advice from physicians, at the time. I know because I worked in critical care then. I'm no longer working as one since the corruption, and blatant disregard for true healthcare in our system which has failed the public.

When asked if "I'd like any shots" I always tell them no. I'm part of the VA, and they always comply with whatever Big Pharmaceutical needs them to do. I refused it, with an unrelated exception.

The last required vaccine I took was March 2020 for TDaP mandatory for work. As a result, I became been sick with a low grade fever. I was turned away from stent removal post operation of a kidney stone which all happened the very same week the national emergency was activated, at the time. It was the very last week of March 2020.

It took an additional 3 weeks to remove the stent from the ureter because they needed a negative covid test when I actually had side effects from

see more

2 0 Reply • Share ›

Ricky Ricardo → MultiChubby1
16 days ago
They must have put that box on a separate sheet of paper...and "accidently" lost it!
0 0 Reply • Share ›

Matt → Allen
16 days ago
VAERS is allowed to do this because it was signed into law in 1986 and included immunity to vaccine manufacturers. The Bayh-Dole Act completes the circle of corruption by allowing tax funded research by government science bureaucracies to hold patents on these products.

The government agencies, the pharmaceutical companies and non-profits[GAVI] appear to be engaged in racketeering. They are all engaged in a racket to sell vaccines and to approve them, and they are all making money off it.
3 0 Reply • Share ›

GarySummers
17 days ago
1.) "WOW! Israeli Media Beginning to Expose Covid Jab Genocide"!
https://stateofthenation.co...

2.) 'XCDC Director!'
"Bombshell: CDCDirector Rochelle Walensky's Husband Took Millions in "Grant" Money for Pharmaceutical Endeavors"
https://stillnessinthestorm...

3.) "CDC Director Is A Lying Sack Of Sh*T!"

10 0 Reply • Share ›

BChristine → GarySummers
17 days ago
Ugh. These all come up as ads to me ... what do I need to do to see what you have linked?
2 0 Reply • Share ›

Ricky Ricardo → BChristine
16 days ago edited
What browser are you using? I assume that you're using the microshaft 0S. If you're using "edge" and "bing", you'll get nothing but censorship - and ads. Do you have an adblocker installed?

Brave Browser with Brave Search, or Firefox and Duck Duck Go, with Adblocker Ultimate, should get you to what you need. I've been running Linux for a couple of years now and I don't have to worry much about ads and popups; although, I'm getting messages from RudeTube now that tell me they **don't allow** ad blockers on their site. So far, I've been able to dismiss that message.
1 0 Reply • Share ›

BChristine → Ricky Ricardo
10 days ago
Thanks RR. I am using MS Chrome and I have AdBlock+ installed. I checked out the BRAVE Browser and it looks good ... so are you saying after I download it, I should have no probs viewing YT? Despite my opposition to YT and all it stands for, there are many news clips, podcasts and music that only use it.
1 0 Reply • Share ›

Ricky Ricardo → BChristine
10 days ago
I'll try to make it easy for you. Unless I'm wrong, MS Chrome is still controlled by MS. That company is heavily into censorship, surveillance and evasiveness - just like Google; except that Google is much, much bigger - with their own Quantum Computer. MS is working on A.I. full time! I would ditch it. Brave is very configurable as far as security goes; although, if you simply install it and don't change the security, you shouldn't have any trouble with RudeTube videos. It uses Brave Search, which is better than some others - especially anything from microshaft. ;) You can also download Firefox with Duck Duck Go search. If the default is Google, change it to Duck Duck. I have Firefox (and Brave; and Vivaldi; and Tor and...). I'll give you the link to download Firefox. Go to Settings > General > Startup and click the box "Open previous windows and tabs", if you want to preserve them when you close Firefox. Brave has a similar setting under Settings > Get Started. This link is assuming that your computer is 64bit. If by some chance, it's only 32bit; just search for that version.
https://www.mozilla.org/en-...
If you'd like to set up add-ons/extensions the way mine is, click on the horizontal bars on the top/right - click on add-ons and themes and scroll down to "Find more add-ons. Search for "Video DownloadHelper", Duck Duck Go Privacy Essentials and AdBlocker Ultimate. I also have "Popup blocker Ultimate", but that may be to confusing for you. ;)
1 0 Reply • Share ›

BChristine ➜ Ricky Ricardo
10 days ago

Thank you for this information RR! I know the evils of MS, Google and all the others, and unfortunately Duck-Duck-Go went mainstream awhile ago, so I would think twice before using them. I will look into this shortly when I have some time to mess with it ... but I really appreciate your time in explaining it all :)

0 0 Reply • Share ›

Brian Collecott ➜ BChristine
16 days ago edited

After the 2 Ads or see it here (Jimmy Dore 4 mths ago)

0 0 Reply • Share ›

chris ➜ GarySummers
12 days ago

wrote about it with more details a year ago:
https://mejbcart.substack.c...
The still enjoyed freedom of WALENSKY's is a criminal joke, in my opinion..

0 0 Reply • Share ›

Ricky Ricardo ➜ GarySummers
16 days ago

CORRECTION on the video: This is becoming a **Plandemic** of **LIARS and DECIEVERS**!

0 0 Reply • Share ›

Ivanidea
17 days ago

Two sets of books. How fitting.

9 0 Reply • Share ›

r2bzjudge
17 days ago

"CDC says it reviewed 20,000 reports of deaths — none were related to COVID shots"

I can't trust anything the CDC says. It is obvious to me that the Covid shots are neither safe or effective. The CDC refuses to admit the truth. Dr. Peter McCullough reviewed 35 autopsies of people who had the Covid shot. He found 70% to be related to the Covid shot. Dr. McCullough doesn't have an agenda to protect, but the CDC does.

The CDC hid for two years, that it's death safety signal triggered. They also hid that 770 safety signals triggered. The CDC s not trustworthy.

8 0 Reply • Share ›

Guest
17 days ago

People should refuse any and ALL vaccines until the makers are as equally liable for their products as auto manufacturers are.

5 0 Reply • Share ›

JosephPlummer
16 days ago

When the primary enemy is defined as "vaccine hesitancy," and the primary objective is defined as 100% vaccine obedience, there is no incentive to properly gather and convey evidence of harm. There can be no "informed consent."

4 0 Reply • Share ›

holisticpoet
17 days ago

Given everything we know about the vaccine and pharmaceutical industries, this information should not be a surprise to anyone. Unfortunately too many people are completely unaware of just hoe badly they are being deceived.

4 0 Reply • Share ›

Ricky Ricardo ➜ holisticpoet
16 days ago

They will never be successful at deceiving me. They can "try" all they want! As you alluded to; the masses are quite easily deceived.

0 0 Reply • Share ›

Double_Up
17 days ago

Millions dead and dying I expect. For how long?

3 0 Reply • Share ›

Ricky Ricardo ➜ Double_Up
16 days ago edited

Those Synthetic Spike Proteins and the Lipid Nano-particles travel throughout the body - and multiply. I suspect that they will be ravaging the body until they eventually kill the "host". Some sooner - some later. **A**ntibody **D**ependent **E**nhancement is a serious issue to look out for. It could take 3 months or 3 years; although, it is almost certain that the person will die.

0 0 Reply • Share ›

Polly Green
17 days ago edited

Remember that what we would call a bug, they'd call a feature. They don't want VAERS to "work." They want it to be incomplete, inaccurate and of course, ignored.
Here's a very good analysis that includes info about a couple of the (vaccine injured) authors. https://www.youtube.com/liv...

3 0 Reply • Share ›

Faith ➜ Polly Green
17 days ago

Actually, they WANT it to "time out" and delete the entry before it can be finished and submitted, because doctors are usually too busy to waste ANOTHER half hour trying again to enter a report. It is the CDC's way of saying, "Shut up and go away. No reporting allowed!".

5 0 Reply • Share ›

Polly Green ➜ Faith
17 days ago

Yes, that's what I mean about it being a feature. It's "working" exactly as designed.

1 0 Reply • Share ›

Meave G.
17 days ago edited

My daughter-in-law developed postpartum preeclampsia after our fourth grandchild was born. She had one covid vaccine before she became pregnant, and didn't get the second because of the pregnancy (Thank God). Her OB-GYN told her that he had noticed an increase in preeclampsia in patients who had received one or both covid vaccines (the maximum at the time). Her sister had a miscarriage after getting the first two vaccines. She got pregnant again, and she also developed postpartum preeclampsia. They had the same doctor. He said he had tried to reporting the increase in preeclampsia, but it wasn't accepted. The way covid was handled is horrible and unconscionable.

2 0 Reply • Share ›

Christine Jahnig
17 days ago

Why am I not surprised? Anything the FDA and the CDC have their fingers in is going to be contaminated by bias toward big pharma. It could not be otherwise. I pray that the person who is elected president next November is the person who is capable of putting an end to the obscene connections between these three parties, the person who will put the well being, health and lives of Americans first.

2 0 Reply • Share ›

John Stone Mod
15 days ago

It also should be said that even with this defective system that was plenty evidence in the public domain within days (and probably hours) of the Covid shot roll out that the products needed to be instantly withdrawn. For instance, I wrote to the BMJ on 17 February 2021 pointing out the horrific situation.

https://www.bmj.com/content...

It could be that the systems failures are technical distraction from the mayhem that has been going now for 3 years.

1 0 Reply • Share ›

Ricky Ricardo
16 days ago edited

Does anyone here even wonder why I often type: "**Fraud, Lies, Deception and Illusion**"? This is the world we live in. Not one of the agencies that are tasked with looking out for our best interests, have any concern at all for our health and well being! Every one of them is evil and corrupt to the core! Their interest is in nothing but **More Money**, **More Power**, and **More Control**! I fully realize that this in not what people want to hear - or believe; but it's what they **NEED** to hear and believe. "The love of money is the root of all evil" - and these psychopathic Luciferians love their money; and it will **NEVER** be enough!

1 0 Reply • Share ›

Cathie
16 days ago

Sullivan identifies pharma's lack of liability for vaccine-caused injury and death as the underlying problem, but his proposed solutions (ban drug advertising, spend that money on R&D, divert all pharma tax receipts to federal vaccine injury compensation programs) overlook the obvious first step: dismantle the legal apparatus that protects pharma from liability for "vaccine" injuries and deaths!

1 0 Reply • Share ›

Bill H RRT
16 days ago edited

I hope and pray for Sullivan. I know there is a chance to detox from vaccine effects (if there isn't permanent damage) following Dr. Gary Null's protocols, to do so. I hope he reads and sees this. Null has a few channels and posts information on Rumble.

1 0 Reply • Share ›

WelcomeTheEagle88
17 days ago

Thank you John-Michael for taking the time and allowing me to contribute. VAERS is simply running cover for big pharma, but thank God they are at least dumping out any data we are allowed to see. VAERS if nothing else is good for catching the carnival tricks VAERS administrators are pulling on the system. The best VAERS Interactive Dashboard here: https://www.vaersaware.com/...

1 0 Reply • Share ›

William Myers
12 days ago

As a taxpayer of this country, I demand that it be made public knowledge who the individuals within the FDA and CDC are who are responsible for the decisions that were made that helped VAERS mislead the public rather than having only some unknown entity re: the CDC or the FDA to direct out ire at. Let the court of public opinion know who these individual criminals making these decisions are. Publish their names and let the court of public opinion do what it must do to stop these maniacs, who until now have been faceless and nameless criminals hiding behind the facade of the agencies!!! The CDC and FDA as such are not people and are not making the decisions that are ruining lives every day. Individuals are making these life-ruining decisions. Give us these criminals!!!

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Steven Andjres
15 days ago edited

If 1.7 million injuries had been reported and if only 1% of them are publicly released then will you please just do the math ?

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Mel R
15 days ago

Until July 2023, CDC did post deaths from the covid shots. It was hidden, but it was there. 2021 - 2023. Since July they stopped posting. Viewing on the Wayback Machine can verify this: https://web.archive.org/web...

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Christine Vigneri
16 days ago

would love to know what the BMJ is,never heard of it before.

0 0 Reply • Share ›

John Stone Mod ➜ Christine Vigneri
16 days ago

The British Medical Journal

1 0 Reply • Share ›

Gary Brown
16 days ago edited

This is what everyone needs to know from the CDC Foundations own website.

WHAT IS THE CDC FOUNDATION?

Established by Congress, the CDC Foundation helps the Centers for Disease Control and Prevention do more, faster, by forging effective partnerships between CDC and corporations, foundations, organizations and individuals to fight threats to health and safety. The CDC Foundation is a 501(c)(3) public charity.

https://www.cdcfoundation.o...

VAERS COVID Vaccine Adverse Event Reports

Reports from the Vaccine Adverse Events Reporting System. Our default data reflects all VAERS data including the "nondomestic" reports.

1,605,764 Reports Through October 27, 2023

https://openvaers.com/covid...

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Matt
16 days ago

I wonder if Dr. Sullivan is on the McCullough protocol. I wonder if the nattokinase is digesting the heart scar tissue. And I wonder if he understands the role cationic lipid polymers may be playing and is aware that EDTA IV chelation has been proven able to remove them.

0 0 Reply • Share ›

BH387
17 days ago

OF course the system is set up to make the appearance of safety monitoring while in fact covering up safety issues. Vaccines are the greatest profit makers for the cabal, who also rake in big bucks from all the injuries and rampant chronic illness they cause or contribute to, as well as lowering resistance to other diseases. The gift that keeps giving for the cabal. But it at long last seems to be approaching the breaking point, as too many are noticing and awareness is exploding.

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Children's Health Defense® is a 501(c)(3) non-profit organization. Our mission is to end childhood health epidemics by working aggressively to eliminate harmful exposures, hold those responsible accountable and establish safeguards to prevent future harm. We fight corruption, mass surveillance and censorship that put profits before people as well as advocate for worldwide rights to health freedom and bodily autonomy.

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